

**LISTING OF CLAIMS**

This listing of claims will replace all prior versions, and listings, of claims in the application.

1-54. Cancelled

55. (New) A surgical method, comprising:

forming a lesion with an ablation element on a distal region of a relatively short shaft; and  
applying stimulation energy to tissue with a stimulation element on the distal region of the relatively short shaft after forming the lesion with the ablation element.

56. (New) A surgical method as claimed in claim 55, further comprising placing the distal region of the relatively short shaft directly against tissue.

57. (New) A surgical method as claimed in claim 55, further comprising  
inserting a portion of the relatively short shaft into a patient by way of an opening formed during one of a thoracotomy, median sternotomy, or thoracostomy; and  
placing the distal region of the relatively short shaft directly against tissue.

58. (New) A surgical method as claimed in claim 55, wherein forming a lesion comprises forming a lesion by transmitting ablation energy to tissue with an electrode on a distal region of a relatively short shaft.

59. (New) A surgical method as claimed in claim 55, wherein applying stimulation energy to tissue comprises applying stimulation energy to tissue on one side of the lesion with a stimulation element on the distal region of the relatively short shaft, the method further comprising monitoring tissue on the other side of the lesion to determine whether the tissue stimulation produced a local activation on the other side of the lesion.



60. (New) A surgical method as claimed in claim 55, wherein applying stimulation energy to tissue comprises applying stimulation energy to tissue within the lesion, the method further comprising monitoring tissue in spaced relation to the lesion to determine whether the tissue stimulation produced a local activation in spaced relation to the lesion.
61. (New) A surgical method as claimed in claim 60, further comprising selecting a predetermined stimulation energy level that corresponds to tissue stimulation to a predetermined depth; wherein applying stimulation energy to tissue comprises applying stimulation energy at the predetermined level to tissue within the lesion.
62. (New) A surgical method as claimed in claim 55, wherein applying stimulation energy to tissue comprises applying stimulation energy to tissue with a stimulation element on the distal region of the relatively short shaft after forming the lesion with an ablation element and without substantially moving the relatively short shaft.
63. (New) A surgical method as claimed in claim 55, wherein forming a lesion comprises forming a lesion with a two spaced ablation elements on a distal region of a relatively short shaft, and stimulating tissue comprises stimulating tissue with a stimulation element between the ablation elements after forming the lesion.
64. (New) A surgical method, comprising:  
forming a lesion with an ablation element on a distal region of a relatively short shaft; and  
monitoring local tissue activation with an element on the distal region of the relatively short shaft after forming the lesion with the ablation element.
65. (New) A surgical method as claimed in claim 64, wherein forming a lesion comprises forming a lesion that defines a perimeter around a tissue region with an ablation element on a distal region of a relatively short shaft.
66. (New) A surgical method as claimed in claim 65, wherein monitoring local tissue activation comprises monitoring local tissue activation in within the tissue region with an element on the distal region of the relatively short shaft.



67. (New) A surgical method as claimed in claim 64, further comprising placing the distal region of the relatively short shaft directly against tissue.
68. (New) A surgical method as claimed in claim 64, further comprising:  
inserting a portion of the relatively short shaft into a patient by way of an opening formed during one of a thoracotomy, median sternotomy, or thoracostomy; and  
placing the distal region of the relatively short shaft directly against tissue.
69. (New) A surgical method as claimed in claim 64, wherein forming a lesion comprises forming a lesion by transmitting ablation energy to tissue with an electrode on a distal region of a relatively short shaft.
70. (New) A surgical method as claimed in claim 64, wherein monitoring local tissue activation comprises wherein monitoring local tissue activation with an electrode on the distal region of the relatively short shaft.
71. (New) A surgical method, comprising:  
forming a lesion within cardial tissue;  
positioning a first stimulation element on epicardial tissue adjacent to the lesion;  
positioning a second stimulation element on endocardial tissue adjacent to the lesion;  
applying stimulation energy from one of the first and second stimulation elements; and  
detecting whether the applied stimulation energy is transmitted through the lesion with the other of the first and second stimulation elements to determine whether the lesion is transmural.



72. (New) A surgical probe, comprising:

a relatively short shaft defining a distal region and a proximal region;

an ablation element defining an ablation element configuration on the distal region of the relatively short shaft; and

a stimulation element defining a stimulation element configuration on the distal region of the relatively short shaft, wherein the ablation element comprises a plurality of longitudinally spaced ablation elements and the stimulation element comprises a plurality of located between respective pairs of adjacent ablation elements, the stimulation element configuration being different than the ablation element configuration.

73. (New) A surgical system, comprising:

a source of ablation energy;

a source of stimulation energy; and

a surgical probe, adapted to be operably connected to the source of ablation energy and the source of stimulation energy, the surgical probe including a relatively short shaft defining a distal region and a proximal region, an ablation element defining a ablation element configuration on the distal region of the relatively short shaft, and a stimulation element defining a stimulation element configuration on the distal region of the relatively short shaft, wherein the ablation element comprises a plurality of longitudinally spaced ablation elements and the stimulation element comprises a plurality of located between respective pairs of adjacent ablation elements, the stimulation element configuration being different than the ablation element configuration



74. (New) A surgical system, comprising:

a source of ablation energy;

a source of stimulation energy; and

a surgical probe, adapted to be operably connected to the source of ablation energy and the source of stimulation energy, the surgical probe including a relatively short shaft defining a distal region and a proximal region, an ablation element defining an ablation element configuration on the distal region of the relatively short shaft, and a stimulation element defining a stimulation element configuration on the distal region of the relatively short shaft, wherein the ablation element comprises a pair of longitudinally spaced ablation elements and the stimulation element is located between the ablation elements, the stimulation element configuration being different than the ablation element configuration.